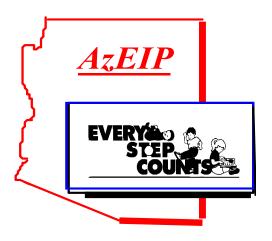
ARIZONA



DEPARTMENT OF ECONOMIC SECURITY

ARIZONA EARLY INTERVENTION PROGRAM



Individuals with Disabilities Education Improvement Act, Part C

STATE PERFORMANCE PLAN 2005

Federal Fiscal Years 2005 - 2010

Part C State Performance Plan (SPP) for 2005-2010

Overview of the State Performance Plan Development:

The Department of Economic Security, Arizona Early Intervention Program (DES/AzEIP), acting as the Lead Agency under Part C of IDEA, gathered and synthesized information from multiple sources, including 618 data, agency data systems, monitoring data, and information from the complaint and dispute resolution process. As was the process in developing the Annual Performance Report, DES/AzEIP personnel reviewed and interpreted the available data to determine the status of the State's performance and compliance with specified indicators and the possible reasons for progress or slippage. Based on the data and its description, DES/AzEIP proposed measurable targets, where State determination was appropriate (i.e., performance indicators and not compliance indicators). In addition, DES/AzEIP proposed improvement activities, timelines, and resources that aligned with activities of the Arizona Compliance Agreement and extended into the period beyond the scope of the Compliance Agreement.

DES/AzEIP convened three stakeholder meetings and presented data and information based on the preliminary drafts described above to each stakeholder group. DES/AzEIP's presentation focused on the statewide data, and, when available, local data, and the meaning of the data. For example, DES/AzEIP presented statewide and local data on Indicator 7 regarding the percent of eligible children with IFSPs for whom evaluation and assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline. DES/AzEIP presented data for both (a) evaluation and assessment and (b) the initial IFSP, and described how the data could be interpreted. After a brief summary of the State's current Compliance Agreement initiatives that impact compliance with the 45-day timeline, DES/AzEIP engaged stakeholders in a discussion of (a) the data, (b) the interpretation of the data, and (c) the improvement activities, timelines and resources, excluding Compliance Agreement activities, that would improve the State's compliance with each indicator. Input from the three stakeholder groups was documented during the meetings and incorporated into the State Performance Plan.

The composition of each stakeholder group determined the focus of each meeting. The first stakeholder group was composed primarily of (1) DES/AzEIP's contractors, who are responsible for the Initial Planning Process (IPP) and Program Coordination, (2) agency representatives from (a) the DES, Division of Developmental Disabilities (DDD), (b) Arizona State Schools for the Deaf and the Blind (ASDB), and (c) the Department of Health Services, Office for Children with Special Health Care Needs (ADHS/OCSHCN). Because this group is involved with public awareness, child find, the initial evaluation and assessment, and, if eligible, the development of the initial IFSP, DES/AzEIP staff engaged this group in a discussion of Indicators 3 (child outcomes), 5 (percent of children, birth to one, with an IFSP), 6 (percent of children, birth to three, with an IFSP), and Indicator 7 (percent of infants and toddlers with an IFSP for whom evaluation and assessment and an initial IFSP meeting was conducted within the 45-day timeline).

The second and third stakeholder groups were composed of (1) members of the Interagency Coordinating Council (ICC); (2) DES/AzEIP's contracted Program Coordinators; (3) agency representatives from DDD, ASDB, ADHS/OCSHCN, and Arizona Department of Education (ADE); and (4) the public. Invitations to the second and third stakeholder groups were broadly distributed electronically to listservs for the ICC, its committees, agency partners, contractors and others who have requested notices regarding AzEIP and the ICC. The second stakeholder group focused on Indicators 1 (timely services), 7 (percent of infants and toddlers with an IFSP for whom evaluation and assessment and an initial IFSP meeting was conducted within the 45-day timeline,) and 8 (transition). The third stakeholder group focused on Indicators 4 (family outcomes), and 9 (general supervision), which touched on compliance and performance for all of the other indicator areas.

DES/AzEIP also facilitated an early childhood outcomes task force consisting of representatives from the IPP contractors, AzEIP Standards of Practice trainers, a higher education institute, ASDB, and DES/AzEIP, to make recommendations for Child Outcomes, Indicator #3. The task force's preliminary recommendations were shared with the first stakeholder group and input incorporated into the plan.

DES/AzEIP will disseminate the SPP to the public via broad electronic distribution to its listservs for the ICC, its committees, agency partners, DES/AzEIP contractors, and others who have requested notices regarding AzEIP and the ICC. DES/AzEIP also will post the SPP to its website.

(The following items are to be completed for each monitoring priority/indicator.)

Monitoring Priority: Early Intervention Services in Natural Environments

Indicator – 1. Percent of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner.

Measurement: Percent = # of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner divided by the total # of infants and toddlers with IFSPs times 100.

Overview of Issue/Description of System or Process:

The family's IFSP team (of which the family is a member) decides which supports and services are needed to make progress toward the desired outcomes. These supports and services are listed on the IFSP, along with the projected "start date" for each. The IFSP team designates the start date for each service to reflect the priorities of the family and their need for support in attaining the identified IFSP outcomes, as well as the roles of each team member in supporting each other and the family. As a result, start dates may be staggered over the period for which the IFSP is established. The service coordinator is responsible for accessing the early intervention services identified on the IFSP. AzEIP service coordinators obtain services through their agencies' network of providers, which can include employees or contractors and through a family's health plan.

AzEIP's Child File Audit Guidance documents defined "timely" as beginning "very close to the start date on the IFSP". AzEIP rates a program noncompliant if <u>any</u> of the early intervention services listed on the IFSP are not provided in a timely manner; however "timely" was not consistently defined. For the purpose of future monitoring and reporting, AzEIP will revise monitoring tools and procedures to determined service(s) timely if the service(s) are started within 30 calendar days of the start date on the IFSP. Service coordination is not included in this definition and is provided throughout the period of the child's enrollment in AzEIP.

Baseline Data for FFY 2004 (2004-2005):

2004-05 Baseline data that services are provided in accordance with start date on IFSP:

Year	2004-2005	
Data Source	PSAs	Site Visits
Number of IFSPs reviewed	407	168
# Who receive services in a timely manner	265	81
Percent	65%	48%

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(OMB NO: 1820-0578 / Expiration Date: 01/31/2006)

Discussion of Baseline Data:

The two components of AzEIP's Continuous Monitoring and Quality Improvement System (CMQIS), (1) the Program Self-Assessments (PSAs) and (2) onsite monitoring visits, are the sources of the baseline data. A complete description of AzEIP's CMQIS is found in the overview of Indicator 9. The PSA percentage reflects the agency's determination of whether all services started very close to the start date noted on the IFSP. During on-site monitoring visits, the monitors found a large number of IFSPs in which the start date was the same date as the IFSP. To take this error into consideration, the monitors made a determination of "timely" if there was documentation in the child's file that all services were provided within 30 days of the "start date" listed on the IFSP. Therefore, the self-assessments and on-site monitoring results used different definitions of "timely."

Neither the program self assessment nor the on-site process captured the timeliness of <u>each</u> service listed for a child, but rather evaluated if <u>all</u> IFSP services were provided in a timely manner. If <u>any</u> service listed on the IFSP was not started in a timely manner, the entire item was considered noncompliant. In addition, there was no consideration of mitigating factors, such as child illness or cancellations by family members. The higher self-rating for PSAs may be the result of programs' access to other sources of information to determine when services started for a child, such as electronic records, billing data, and staff reports. The on-site monitors generally only used the child's file.

Other contributing factors influencing the identified non-compliance include: (1) many service coordination agencies did not have a mechanism in place to track and document when a service actually began; (2) the onsite reviewers often found that the "start date" listed on the IFSP was the same date as the IFSP meeting, not the anticipated start date for the service. This, too, may have contributed to the low compliance rating, as the service was not intended to start the same day as the IFSP meeting; and (3) statewide capacity issues for ongoing therapy contributed to noncompliance for timely receipt of services, as service coordinators struggle to locate providers for families.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	PSAs: 69% Site Visits: 60%
2006 (2006-2007)	PSAs: 75% Site Visits: 65%
2007 (2007-2008)	100%
2008 (2008-2009)	100%
2009 (2009-2010)	100%
2010 (2010-2011)	100%

Improvement Activities/Timelines/Resources:

Improvement Activities	Timelines	Resources
Revise and expand policies and procedure related to timely service provision		
Align policies and procedures across all agencies and providers regarding timely service provision.	February 2006	CQI Coordinators, CSPD Coordinator, Executive Director, State Interagency Team, and TA and Monitoring Specialist
Disseminate and implement revised policies and procedures related to timely service provision across the service providing agencies	February 2006 and ongoing	CQI Coordinators, CSPD Coordinator, Executive Director, State Interagency Team, and
Monitor through CMQIS (see Indicator #9) to ensure implementation of policies and procedures	March 2006 and ongoing	CQI Coordinators, TA and Monitoring Specialist, CSPD Coordinator
Evaluate the scope of system capacity issues		
Meet with Standards of Practice contractor (ASDTP) to review and, as needed, revise the AzEIP Program Registration/Personnel Registry to accurately capture personnel providing early intervention.	December 2005, 2006	CSPD Coordinator, ASDTP Staff, Executive Director
Evaluate the number of therapists involved in the provision of early intervention services.	December 2005	CSPD Coordinator, TA Specialist, Arizona Staff Development Training Project (ASDTP) Staff
Conduct an analysis of current market rates for therapies (national therapy rates, the AzEIP participating agencies' rates, AHCCCS, private insurance, and public schools)	January 2006	CSPD Coordinator, EP&P Consultants with DDD
Identify and implement personnel recruitment and retention strategies		
Establish and maintain regional directories of providers that will be available to agencies and programs that are building or expanding the service-providing network.	June 2006, 2007, 2008	Local Program Coordinators, TA Specialist, CSPD Coordinator
Through newsletters and conference presentations, partner with State Professional Associations to reach greater numbers of qualified personnel who are interested in providing early intervention services.	March 2006 and annually	CSPD Coordinator, ASDTP Staff
Work with the Institutes of Higher Education (IHE) to encourage students to prepare for the field of early intervention, recruit new graduates and incorporate the AzEIP Standards of Practice requirements into preservice curricula.	December 2005 and annually	CSPD Coordinator, ASDTP Staff

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Implement a team-based service delivery model that ensures compliance with timely identification of infants and toddlers with disabilities and provision of services to infants and toddlers with disabilities and their families while maximizing personnel resources.		
Draft team-based service delivery model that ensures compliance and maximizes personnel resources.	December 2005	Executive Director, State Interagency Team, DES/AzEIP Staff
Facilitate broad public review and comment on the proposed service delivery model.	March 2006	Executive Director, State Interagency Team, DES/AzEIP Staff
Implement an interagency plan to support the proposed model of service delivery, including the establishment of new contracts and/or the revision of policies and procedures.	December 2006	Executive Director, State Interagency Team, DES/AzEIP Staff
Evaluate efficacy of team-based model.	July 2007 and ongoing through 2010	CQI Coordinators, CSPD Coordinator, TA Specialist, Technical Assistance & Monitoring Specialists, State interagency Team (SIT)
Update IFSP form and related procedures, as needed, to align with SPP indicators and IDEA 2004 requirements		
Revise IFSP to: • clarify "Start Date" as "Planned Start Date" • explore clarification of initial vs. completed IFSP	January 2006 – March 2006	CQI Coordinators, CSPD Coordinator, Technical Assistance & Monitoring Specialist
Disseminate revised IFSP form with guidance	March 2006	CQI Coordinators, Technical Assistance & Monitoring Specialists, CSPD Coordinator
Incorporated by reference are the improvement activities from Indicator # 7 regarding technical assistance and training on the above items.		
Incorporated by reference are the improvement activities from Indicator # 9 regarding implementation of the CMQIS.		

Overview of the State Performance Plan Development: Described in Indicator 1.

(The following items are to be completed for each monitoring priority/indicator.)

Monitoring Priority: Early Intervention Services in Natural Environments

Indicator – 2. Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or programs for typically developing children.

Measurement: Percent = # of infants and toddlers with IFSPs who primarily receive early intervention services in the home or programs for typically developing children divided by the total # of infants and toddlers with IFSPs times 100.

Overview of Issue/Description of System or Process:

Historically, the legal requirement for natural environments and the reasoning behind the requirement was not well understood by the early intervention community. Technical assistance, training, policy clarification, and contract changes in the years since AzEIP began, have resulted in a steady shift in service settings, away from settings where only children with disabilities participate, to settings such as the home, park, child care facilities, and other community places.

The AzEIP Standards of Practice, required of all service providers in early intervention since 2001, embeds the philosophy of providing families supports and services in natural environments throughout the knowledge and skills components. The Standards of Practice helps practitioners understand the importance of learning a family's routines and activities, so they can identify the natural learning opportunities available to children throughout their daily activities.

The AzEIP IFSP Guidance Document describes the federal requirements, philosophical tenets, and practice guidelines for providing services in natural environments. The statewide IFSP form provides a structure and format for developing IFSPs in alignment with the requirements and intent of the law.

Through its Continuous Monitoring and Quality Improvement System, described fully in Indicator 9, AzEIP monitors programs' compliance with the natural environment requirement. Both program self-assessments and on-site monitoring visits reinforce the requirements and philosophy behind providing services to families and children in natural environments.

Baseline Data for FFY 2004 (2004-2005):

618 Table 2	2004
Percentage of infants and toddlers with IFSPs who primarily receive early intervention services in the home or programs for typically developing children.	86%
Setting- "Other", including parks, libraries and community centers	11%

Discussion of Baseline Data:

As of December 1, 2004, 618 Settings data indicate that home and programs designed for typically developing children and other settings are identified as the setting of the predominant service for 97% of children receiving Part C services. Fewer than 3% of children are receiving their predominant

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services in a non-natural environment. The percentage of children served in the home, programs for typically developing children, and other community settings increased from 62% to 85% between 1999 and 2002 and has remained steady since that time.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	86%
2006 (2006-2007)	86%
2007 (2007-2008)	88%
2008 (2008-2009)	90%
2009 (2009-2010)	92%
2010 (2010-2011)	94%

Improvement Activities/Timelines/Resources:

Improvement Activities	Timelines	Resources
Continued implementation of the AzEIP Standards of Practice for early intervention professionals to support understanding of early intervention in natural environments.	December 2005 with annual trainings and ongoing test options	CSPD Coordinator, ASDTP
Participate on Arizona Inclusion Coalition to expand awareness of natural environments for early childhood programs.	December 2005 and ongoing	CSPD Coordinator
Provide focused technical assistance to programs that do not comply with natural environments.	December 2005 and ongoing	CQI Coordinators, Technical Assistance & Monitoring Specialists
Incorporated are the improvement activities from Indicator #1 concerning the implementation and maintenance of AzEIP's team-based service delivery model.		

NEW INDICATOR

(The following items are to be completed for each monitoring priority/indicator.)

Monitoring Priority: Early Intervention Services in Natural Environments

Indicator - 3. Percent of infants and toddlers with IFSPs who demonstrate improved:

- A. Positive social-emotional skills (including social relationships);
- B. Acquisition and use of knowledge and skills (including early language/communication); and
- C. Use of appropriate behaviors to meet their needs.

Measurement:

- A. Positive social-emotional skills (including social relationships):
 - a. Percent of infants and toddlers who reach or maintain functioning at a level comparable to same-aged peers = # of infants and toddlers who reach or maintain functioning at a level comparable to same-aged peers divided by # of infants and toddlers with IFSPs assessed times 100.
 - b. Percent of infants and toddlers who improve functioning = # of infants and toddlers who improved functioning divided by # of infants and toddlers with IFSPs assessed times 100.
 - c. Percent of infants and toddlers who did not improve functioning = # of infants and toddlers who did not improve functioning divided by # of infants and toddlers with IFSPs assessed times 100.

If children meet the criteria for a, report them in a. Do not include children reported in a in b or c. If a + b + c does not sum to 100%, explain the difference.

- B. Acquisition and use of knowledge and skills (including early language/communication):
 - a. Percent of infants and toddlers who reach or maintain functioning at a level comparable to same-aged peers = # of infants and toddlers who reach or maintain functioning at a level comparable to same-aged peers divided by # of infants and toddlers with IFSPs assessed times 100.
 - b. Percent of infants and toddlers who improved functioning = # of infants and toddlers who improved functioning divided by # of infants and toddlers with IFSPs assessed times 100.
 - c. Percent of infants and toddlers who did not improve functioning = # of infants and toddlers who did not improve functioning divided by # of infants and toddlers with IFSPs assessed times 100.

If children meet the criteria for a, report them in a. Do not include children reported in a in b or c. If a + b + c does not sum to 100%, explain the difference.

- C. Use of appropriate behaviors to meet their needs:
 - a. Percent of infants and toddlers who reach or maintain functioning at a level comparable to same-aged peers = # of infants and toddlers who reach or maintain functioning at a level comparable to same-aged peers divided by # of infants and toddlers with IFSPs assessed times 100.

- b. Percent of infants and toddlers who improved functioning = # of infants and toddlers who improved functioning divided by # of infants and toddlers with IFSPs assessed times 100.
- c. Percent of infants and toddlers who did not improve functioning = # of infants and toddlers who did not improve functioning divided by # of infants and toddlers with IFSPs assessed times 100.

If children meet the criteria for a, report them in a. Do not include children reported in a in b or c. If a + b + c does not sum to 100%, explain the difference.

Overview of Issue/Description of System or Process:

Background: DES/AzEIP presented the new Indicator to its statewide Initial Planning (IPP) Contractors, Interagency Coordinating Council, and participating state agency representatives and received recommendations for members on a task force to discuss the overall State plan for Indicator #3. That task force meets regularly and includes representation from the IPP contractors, AzEIP Standards of Practice trainers, a higher education institute, the Arizona State Schools for the Deaf and the Blind, and DES/AzEIP. The task force has reviewed all documents and technical assistance to date from the ECO Center and intends to research the tool(s) and process that would best be suited for DES/AzEIP to gather entrance/exit data on the early childhood outcome indicators. When the tool(s) and process are determined, the following procedures will be used by the AzEIP community to collect and analyze the requisite data.

Overview of Plan: The State will adopt a standard tool be to be administered to all eligible children, birth to 2.4 years old as part of the initial assessment under 34 CFR 303.322. The assessment will be administered by a member of the IPP team working with the family. DES/AzEIP is leaning towards having the IPP team rate each outcome using the ECO Center's Child Outcomes Summary Form, which will be maintained in the child's record. The rating will be based upon multiple sources of information, such as results of the adopted tool, other evaluation or assessment tools administered, observation, parent report, informed clinical opinion, and available records. The Evidence Supporting Summary Rating form, or a comparable form, will be completed at the same time to document and support the team's ratings.

The adopted tool will again be administered at or near the child's exit from AzEIP regardless of when the child exits (as long as s/he has been enrolled for at least six months) and regardless of the reason for exiting. If the child is potentially eligible for Part B, the tool will be administered as part of the Comprehensive Developmental Assessment (CDA) conducted pursuant to the Intergovernmental Transition Agreement between DES and the Arizona Department of Education (ADE). The CDA will be prepared by a member(s) of the early intervention team working with the family in preparation for transition. Discussions with the ADE, 619 program, have occurred to further the goal that information gleaned from the CDA at exit from AzEIP be used by Part B to provide functional information concerning the child, assist with eligibility determination for Part B, and contribute to planning for children entering preschool special education. The potential exists for use of this data as entry data for the 619 program and discussions continue between AzEIP and ADE in furtherance of this possible goal.

Training & TA: DES/AzEIP will have chosen a measurement tool by March 2006, and will provide training to the AzEIP participating agencies and contractors that receive or respond to initial referrals and the IPP teams, on the procedures and requirements for gathering entrance data during the AzEIP eligibility process. This training is to occur in March and April 2006, around the State, to facilitate access for providers in urban and rural areas, as well as on Native American reservations. Technical Assistance and Monitoring Specialists will provide on-going support to the programs as they implement the requirements. DES/AzEIP will provide statewide training to service providers, who will be responsible for gathering the exit data, in conjunction with the statewide training to be implemented for its redesign to the team-based service delivery model (referenced in Indicator #1).

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DES/AzEIP will include expertise in its Training Cadre to provide training on the Child Outcomes Summary form and the tool that will be adopted.

<u>Data collection</u>: For children who are referred and become eligible for AzEIP in May through September 2006, DES/AzEIP will collect entry data. The contractors receiving referrals will use a form created by DES/AzEIP to capture children and their scores for this indicator. The agencies will additionally be required to submit monthly copies of the Child Outcomes Summary Form with the Evidence Supporting Summary Rating form for children being made eligible so that DES/AzEIP can monitor implementation.

DES/AzEIP will report entry data from May through September 2006 with the Annual Performance Report due in February 2007. DES/AzEIP will work with the AzEIP service providing agencies to revise data systems to incorporate the requisite data elements to provide entry and exit data for this indicator. The programs will be required to monitor their data systems at least monthly, to ensure accurate and timely data collection.

Ongoing monitoring & TA: The task force in coordination with DES/AzEIP will continue meeting regularly to problem solve and to monitor data as it is captured to identify trends and themes and target TA and training as needed. DES/AzEIP will incorporate the above information into its Policy & Procedure Manual so that current and new providers have the written policy and procedure for implementing this plan.

Baseline Data for FFY 2004 (2004-2005): N/A

Discussion of Baseline Data: N/A

FFY	Measurable and Rigorous Target
2005 (2005-2006)	N/A
2006 (2006-2007)	N/A
2007 (2007-2008)	N/A
2008 (2008-2009)	N/A
2009 (2009-2010)	N/A
2010 (2010-2011)	N/A

Improvement Activities/Timelines/Resources: N/A

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Monitoring Priority Indicator 3

NEW INDICATOR

(The following items are to be completed for each monitoring priority/indicator.)

Monitoring Priority: Early Intervention Services in Natural Environments

Indicator – 4. Percent of families participating in Part C who report that early intervention services have helped the family:

- A. Know their rights;
- B. Effectively communicate their children's needs; and
- C. Help their children develop and learn.

Measurement:

- A. Percent = # of respondent families participating in Part C who report that early intervention services have helped the family know their rights divided by the # of respondent families participating in Part C times 100.
- B. Percent = # of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs divided by the # of respondent families participating in Part C times 100.
- C. Percent = # of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn divided by the # of respondent families participating in Part C times 100.

Overview of Issue/Description of System or Process:

Overview: DES/AzEIP adopted 25 questions of the Family Survey – Early Intervention from the National Center for Special Education Accountability and Monitoring (NCSEAM), 20 from the section "Impact of Early Intervention Services on Your Family" and 5 from the NCSEAM item bank in that section. DES/AzEIP is adding fields to the survey for additional demographic information, including the name and agency of the service coordinator and the county within which the family resides. The service coordinator will give the survey to families enrolled in the early intervention program at the end of each annual review of the Individualized Family Service Plan (IFSP). The Service Coordinator is responsible for explaining the survey to the family in a way that is meaningful and conveys to the family that their input is valued. The service coordinator is also responsible for making efforts to ensure that the survey is provided to the family in the family's native language or other mode of communication. Written surveys will be available in English and Spanish. Families may complete the survey in paper form and return it to DES/AzEIP in a self-addressed, postage prepaid envelope provided by the service coordinator, or may complete the survey online by accessing the survey through a link on AzEIP's website to ADE's website. The service coordinator will assist the family to access the website, if necessary.

<u>Data Collection & Monitoring</u>: DES/AzEIP is collaborating with the ADE and will use ADE's web system for inputting and collecting data, as well as running reports. Families will be able to access the web system for inputting the survey online. DES/AzEIP will input survey answers received at its office via the mail, or otherwise, into the web system. DES/AzEIP will have access to the system to run reports to monitor survey responses for program improvement and system compliance purposes. DES/AzEIP also will disseminate reports to programs for use in their AzEIP Program Self-Assessments to improve practice and compliance. DES/AzEIP will revise the current IFSP to align

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with the procedures of distributing the survey to families annually. DES/AzEIP likewise will revise its monitoring tools to align with these procedures.

<u>Training & TA:</u> DES/AzEIP will conduct training on the NSCEAMS survey at its statewide contractor meeting in January 2006 via PowerPoint presentation and have the presentation available on the AzEIP website, as well as, to the local program coordinators to conduct trainings in their communities. Technical assistance will be available through the regional Technical Assistance and Monitoring Specialists and the DES/AzEIP office.

Discussion of Baseline Data: N/A

FFY	Measurable and Rigorous Target
2005 (2005-2006)	N/A
2006 (2006-2007)	N/A
2007 (2007-2008)	N/A
2008 (2008-2009)	N/A
2009 (2009-2010)	N/A
2010 (2010-2011)	N/A

Improvement Activities/Timelines/Resources: N/A

Overview of the State Performance Plan Development: Described in Indicator 1.

(The following items are to be completed for each monitoring priority/indicator.)

Monitoring Priority: Effective General Supervision / Child Find

Indicator - 5. Percent of infants and toddlers birth to 1 with IFSPs compared to:

- A. Other States with similar eligibility definitions; and
- B. National data.

Measurement:

- A. Percent =# of infants and toddlers birth to 1 with IFSPs divided by the population of infants and toddlers birth to 1 times 100 compared to the same percent calculated for other States with similar narrow eligibility definitions.
- B. Percent =# of infants and toddlers birth to 1 with IFSPs divided by the population of infants and toddlers birth to 1 times 100 compared to National data.

Overview of Issue/Description of System or Process:

Arizona utilizes a comprehensive and coordinated system of public awareness and child find efforts to locate, identify, and evaluate all potentially eligible children. Public awareness efforts are directed toward education, health and human service agencies (including agencies serving homeless children and families), tribes and tribal organizations, physicians, hospitals, and other health care providers, families, and child protective services workers. Coordinated efforts include broad dissemination of information, presentation to and training of referral sources, joint child find activities with schools and health care and social service agencies, an online referral system, interagency agreements, and memoranda of understanding.

DES/AzEIP monitors its Child Find and Public Awareness activities through the Program Self-Assessments completed by agencies and programs each year and the on-site monitoring visits. In addition, the local program coordinators, contracted to implement AzEIP's Child Find and Public Awareness Plan, submit monthly reports documenting their activities, as well as, annual summary reports, all of which are monitored and evaluated on an ongoing basis by DES/AzEIP.

Baseline Data for FFY 2004 (2004-2005):

A. Comparison to other states with narrow eligibility requirements:

Rank	State	2004
1	North Dakota	1.72%
2	Montana	1.58%
3	Oklahoma	1.22%
4	Alaska	.82%
5	Missouri	.67%
6	Arizona	.62%
7	Nevada	.58%
8	District of Columbia	.57%

B. Arizona's national rankings with regard to number and percentage of infants birth to 1 receiving early intervention services:

2004	Baseline
National	.92%
Arizona	.61%

Discussion of Baseline Data: The percentage of infants birth to 1 has increased slowly but steadily from .50% in 2001 to .60% in 2004. In previous years, child find efforts focused on encouraging the referral of children under one year of age, and this had a small impact on the percentage of infants served. Analysis of referral data for October 2003 through June 2005 reveals that infants and young toddlers are being referred to AzEIP in substantial numbers and comprise a full 1/3 of all referrals to AzEIP during that period. Despite the large number of infants 0-1 referred to AzEIP, the percent of the population served on Dec.1, 2004 was .61% as compared to 1.54% of children 0-3. Anecdotal evidence suggests that evaluation teams need technical assistance to develop strategies and expertise in evaluating children under the age of 6 months in relation to Arizona's narrow eligibility definition and to develop strategies for serving very young infants.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	.63% of infants birth to 1 with IFSPs receiving early intervention services on Dec.
2006 (2006-2007)	.67% of infants birth to 1 with IFSPs receiving early intervention services on Dec.
2007 (2007-2008)	.70% of infants birth to 1 with IFSPs receiving early intervention services on Dec.
2008 (2008-2009)	.74% of infants birth to 1 with IFSPs receiving early intervention services on Dec.
2009 (2009-2010)	.77% of infants birth to 1 with IFSPs receiving early intervention services on Dec.
2010 (2010-2011)	.80% of infants birth to 1 with IFSPs receiving early intervention services on Dec.

Improvement Activities/Timelines/Resources:

Improvement Activities	Timelines	Resources
Implement strategies to support child find and service provision to infants 0-1.		
Target public awareness to primary referral sources about referring infants and as required by IDEA, 2004.	December 2005 and Ongoing	Local Program Coordinators, TA Specialist
Track and analyze data related to age of children found eligible for Part C compared to data related to age at referral.	December 2005 and Ongoing	TA Specialist, Management Information Coordinator
Research strategies utilized by states with similar eligibility criteria for evaluating and assessing infants birth to 1.	December 2006	Local Program Coordinators, Technical & Assistance Monitoring Specialists, DES/AzEIP Staff
Implement evaluation strategies identified through research.	January 2007	Local Program Coordinators, Technical & Assistance Monitoring Specialists, DES/AzEIP Staff
Identify resources for providers related to evaluation and services for premature infants and children exposed to substances.	January 2007	DES/AzEIP Staff, Technical & Assistance Monitoring Specialists
Incorporated herein are the improvement activities from Indicator #1 regarding implementation of the team-based model.		
Incorporated herein are the improvement activities from Indicator #6 regarding general public awareness, collaborative efforts, and data collection and analysis.		

Overview of the State Performance Plan Development: Described in Indicator 1.

(The following items are to be completed for each monitoring priority/indicator.)

Monitoring Priority: Effective General Supervision / Child Find

Indicator - 6. Percent of infants and toddlers birth to 3 with IFSPs compared to:

- A. Other States with similar eligibility definitions; and
- B. National data.

(20 USC 1416(a)(3)(B) and 1442)

Measurement:

- A. Percent = # of infants and toddlers birth to 3 with IFSPs divided by the population of infants and toddlers birth to 3 times 100 compared to the same percent calculated for other States with similar (narrow, moderate or broad) eligibility definitions.
- B. Percent = # of infants and toddlers birth to 3 with IFSPs divided by the population of infants and toddlers birth to 3 times 100 compared to National data.

Overview of Issue/Description of System or Process: Arizona utilizes a comprehensive and coordinated system of public awareness and child find efforts to locate, identify, and evaluate all potentially eligible children. Public awareness efforts are directed toward education, health and human service agencies (including agencies serving homeless children and families), tribes and tribal organizations, physicians, hospitals and other health care providers, families, and child protective services workers. Coordinated efforts include broad dissemination of information, presentation to and training of referral sources, joint child find activities with schools, health care and social service agencies, an online referral system, interagency agreements, and memoranda of understanding.

Baseline Data for FFY 2004 (2004-2005):

A. Comparison to other states with narrow eligibility requirements:

Rank	State	2004
1	North Dakota	2.8%
2	Montana	2.13%
3	Oklahoma	2.04%
4	Alaska	2.02%
5	Arizona	1.54%
6	Missouri	1.53%
7	District of Columbia	1.3%
8	Nevada	1.3%

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B. Arizona's national rankings with regard to number and percentage of infants and toddlers receiving early intervention services:

	Baseline	Percent change 2000 to 2004
National	2.24%	23%
Arizona	1.54%	21%

Discussion of Baseline Data:

Among states with narrow eligibility requirements (as defined by OSEP) Arizona ranked 5th out of 8 based on December 2004 child count data. Among all states and territories Arizona ranked 45th out of 56.

According to the US Census Bureau, Arizona had the nation's highest growth rate among children under 5 for the period April 2000 to July 2003. Arizona has the second highest population growth rate overall, just behind Nevada. The rapid growth of Arizona's under-5 population is a very significant factor that continues to impact Arizona's comparable child count data. The December 1 count of children served by AzEIP grew by 43% from 2000 to 2004. The percentage of the 0-3 population served increased from 1.27% to 1.54%, a 21% increase. During that same period the state experienced an overall population growth rate of 9.7%.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	1.59%
2006 (2006-2007)	1.65%
2007 (2007-2008)	1.72%
2008 (2008-2009)	1.80%
2009 (2009-2010)	1.88%
2010 (2010-2011)	1.95%

Improvement Activities/Timelines/Resources:

Improvement Activities	Timelines	Resources
Update Public Awareness Plan		
Revise strategies to identify and inform families	January 2006 and	TA Specialist, Local
of children who:	ongoing	Program Coordinators,

 move frequently or are hard to locate (such as migrant workers, homeless and military families) have premature infants or infants with other physical risk factors; are involved with the behavioral health and Medicaid system; are involved with the child protective system (children are wards of the State) 		Technical Assistance & Monitoring Specialists, CQI Coordinators
Continue PA efforts to primary referrals sources	December 2005 and ongoing	TA Specialist, Local Program Coordinators, Technical Assistance & Monitoring Specialists, CQI Coordinators
Develop and maintain collaborative efforts with agencies and organizations representing primary referral sources.		
Continue implementation of Child Find IGA with Arizona Department of Education.	Ongoing	CSPD Coordinator, CQI Coordinators, TA Specialist, Management Information Coordinator
Continue to develop and implement agreements with Early Head Start, Healthy Families, and tribal early care and education programs that outline child find and public awareness responsibilities and efforts	Ongoing	CQI Coordinators, CSPD Coordinator, and Executive Director
Collect, analyze, and utilize public awareness and child find data (e.g. referral source data, child demographics, public awareness materials) to guide efforts.		
Track and analyze public awareness	December 2005 and	Management Information
distribution data by county.	annually through 2010	Coordinator, TA Specialist
Analyze referral data to identify patterns by county or referral source, including CAPTA, health and medical community, programs serving homeless children, etc.	December 2005 and ongoing	Management Information Coordinator, TA Specialist
Analyze 618 data to identify patterns by county.	December 2005	Management Information Coordinator, TA Specialist
Share data analysis findings with regional child find participants	December 2005 and ongoing	Management Information Coordinator, TA Specialist
Incorporate herein are the improvement activities from: • Indicator # 1 regarding the team-based model • Indicator # 5 regarding activities for identifying infants birth to 1		

Overview of the State Performance Plan Development: Described in Indicator 1.

(The following items are to be completed for each monitoring priority/indicator.)

Monitoring Priority: Effective General Supervision / Child Find

Indicator – 7. Percent of infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline.

Measurement: Percent = # of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline divided by the # of eligible infants and toddlers evaluated and assessed times 100.

Overview of Issue/Description of System or Process:

The unique composition of Arizona, both geographically and culturally, present unique challenges in ensuring that all families and children have an IFSP developed within 45 days of referral. Located in the southwest United States, Arizona is composed of densely populated metropolitan areas and vast, desert rural areas. It has 21 tribes represented with different regulatory bodies and different cultures and languages. For example, Havasupai Reservation located deep within a gorge of the Grand Canyon, can only be reached by an eight mile hike, horseback ride or helicopter. Arizona borders Mexico on the south. Arizona also has a population of migrant workers who travel to Arizona with their families and work seasonally. Arizona also has four military bases. All of these factors contribute to the many challenges of ensuring families receive the evaluation and assessment and initial IFSP meeting within 45 days from referral.

Referrals to the early intervention program are received by Initial Planning Process (IPP) contractors throughout the State. The IPP contractors implement screening, as appropriate, to identify children suspected of having a developmental delay or disability as defined by Arizona's eligibility criteria. For children suspected of having a developmental delay or disability, the IPP contractor conducts a multidisciplinary evaluation and assessment, determines AzEIP eligibility, and facilitates the determination of eligibility for one or more of the AzEIP service providing agencies, of which there are four. If eligible, the IPP contractor then works in partnership with the family and individuals likely to be involved in ongoing service coordination and service delivery to develop the Individualized Family Service Plan (IFSP).

Arizona interprets compliance with the 45-day timeline as completion of the IFSP (rather than conducting the initial IFSP meeting). This may significantly limit the State's ability to demonstrate compliance.

Individual child evaluation and assessment and IFSP data is tracked through the ACTS system and AzEIP service providing agency tracking systems. The data is tracked and reported on a monthly basis. The data is reviewed, analyzed, and reported by contractor, program, and region on a quarterly basis. AzEIP focuses monitoring and improvement efforts on those regions/contractors experiencing the most difficulty. Arizona continues to work on improving its timelines for evaluation, assessment and initial IFSP development, an ongoing area of non-compliance.

Baseline Data for FFY 2004 (2004-2005):

Eligible children	Eligible children with IFSPs conducted within 45 day timeline	Percent of eligible children for whom an evaluation and assessment and an initial IFSP was conducted within 45 day timeline
3266	1115	34%

Discussion of Baseline Data:

The data reveals considerable variation across regions, contractors and programs with regard to the timeliness of evaluation and assessment and IFSP. During 2004-2005, three of fourteen programs reported that for more than 60% of referrals, initial IFSPs were developed within 45 days; in contrast, four contractors reported rates of less than 30%. Compared to 2003-2004 data there was some improvement in program performance.

Data confirmed anecdotal reports from contractors that evaluations and AzEIP eligibility determinations are conducted in a more timely manner, with 75% of evaluations and assessments completed within 45 days and 92% conducted within 71 days. In contrast, only 63% of initial IFSPs were developed within 71 days of the initial referral, and 85% are developed within 99 days. Data and anecdotal reports indicate that there are significant difficulties (i) coordinating initial IFSP development with the ongoing service coordination providers, and (ii) ensuring capacity to provide ongoing service coordination. Initial results from file reviews conducted during monitoring visits support these anecdotal reports.

The ACTS data tracking system has been revised to gather more detailed data related to the reason for timeline delays for eligibility determination, and initial IFSP meeting. This additional data is being collected as of September 2005 and will be reviewed beginning November 2005. It is hoped that the "reason" data will provide focus for improvement efforts at the program, regional and state level. AzEIP continues to work with other agency data systems to add fields to collect required data elements.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	37%
2006 (2006-2007)	60%
2007 (2007-2008)	100%
2008 (2008-2009)	100%
2009 (2009-2010)	100%
2010 (2010-2011)	100%

Improvement Activities/Timelines/Resources:

Improvement Activities	Timelines	Resources
Revise and expand policies and procedures related to 45-day timeline		
Clarify "initial IFSP meeting" for purposes of 45-day timeline.	February 2006	DES/AzEIP staff
Align policies and procedures across all agencies and providers regarding 45-day timeline.	February 2006	CQI Coordinators, CSPD Coordinator, Executive Director, State Interagency Team, and TA and Monitoring Specialist
Disseminate and implement revised policies and procedures related to 45-day timeline across the service providing agencies.	February 2006 and ongoing	CQI Coordinators, CSPD Coordinator, Executive Director, State Interagency Team, and
Monitor through continuous monitoring and quality improvement system (see Indicator #9) to ensure implementation of policies and procedures.	March 2006 and ongoing	CQI Coordinators, TA and Monitoring Specialist, CSPD Coordinator
Update IFSP form and related procedures, as needed, to align with SPP indicators		
Revise IFSP to: • clarify initial IFSP meeting vs. completed IFSP • clarify "Start Date" as "Planned Start Date" • document dissemination of family survey annually • incorporate SPP Child Outcomes	January 2006 – March 2006	CQI Coordinators, CSPD Coordinator, Technical Assistance & Monitoring Specialist
Disseminate revised IFSP form with guidance.	March 2006	CQI Coordinators, Technical Assistance & Monitoring Specialists, CSPD Coordinator
Update and Expand Technical Assistance and Training System		
Support and expand TA & Monitoring Specialists statewide	January 2006 and ongoing	Executive Director, CQI Coordinators, TA Specialist, CSPD Coordinator
Establish TA Cadre to support providers in areas of focused priorities.	January 2006 and ongoing	CQI Coordinators, Technical Assistance & Monitoring Specialists
Continue implementation of and identify additional methods of providing technical assistance.	December 2005 and ongoing	CQI Coordinators, Technical Assistance & Monitoring Specialists
Provide technical assistance and/or training to programs regarding: • revisions to IFSP form, including determining and documenting the Planned Start Date in the IFSP • accessing and documenting timely services	March 2006 and ongoing	CQI Coordinators, Technical Assistance & Monitoring Specialists, TA Cadre

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 team-based service delivery model implementation of the NCSEAM survey for families service coordination documentation for required activities 		
Undertake focused monitoring, as appropriate, and	January 2006 and	CQI Coordinators, TA and
implement corrective action/program improvement	ongoing	Monitoring Specialist, and
plans to improve 45-day timeline.		TA Specialist
Incorporated herein are the Improvement Activities	December 2005 and	
from:	ongoing	
 Indicator #1 concerning (i) evaluating system capacity issues; (ii) identifying and implementing a recruitment and retention plan, and (iii) implementing and maintaining of a team-based model. Indicator # 9 regarding the CQIMS Indicator #14 regarding revising data system to incorporate required data elements 		

Overview of the State Performance Plan Development: Described in Indicator 1.

(The following items are to be completed for each monitoring priority/indicator.)

Monitoring Priority: Effective General Supervision / Effective Transition

Indicator – 8. Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday including:

- A. IFSPs with transition steps and services;
- B. Notification to LEA, if child potentially eligible for Part B; and
- C. Transition conference, if child potentially eligible for Part B (monitoring data 2004-2006, data system beginning 2006-2007; ADE data here)

Measurement:

- A. Percent = # of children exiting Part C who have an IFSP with transition steps and services divided by # of children exiting Part C times 100.
- B. Percent = # of children exiting Part C and potentially eligible for Part B where notification to the LEA occurred divided by the # of children exiting Part C who were potentially eligible for Part B times 100.
- C. Percent = # of children exiting Part C and potentially eligible for Part B where the transition conference occurred divided by the # of children exiting Part C who were potentially eligible for Part B times 100.

Overview of Issue/Description of System or Process:

Throughout a child's eligibility with AzEIP, families are informed that supports and services are provided until their child's third birthday. AzEIP's current IFSP form contains the required steps for transitioning children and their families on the Transition Plan and Timeline pages. The service coordinator is charged with facilitating the transition and documenting the steps as they are completed. Technical assistance and training has been provided throughout the past year to inform service coordinators of the requirement to document all steps.

- A. For children who are potentially eligible for Part B services, DES/AzEIP and the Arizona Department of Education adopted policies and procedures to ensure a smooth transition from Part C programs to Part B preschool programs and to identify the responsibilities of each agency during the transition process. These procedures are memorialized in an Intergovernmental Agreement (Transition IGA) and apply to all AzEIP service providing agencies. The Transition IGA, effective November 2004, outlines responsibilities of Public Education Agencies (PEAs) and early intervention providers, including the notification of PEA at two specific times during the year of children potentially eligible for Part B.
- B. The service coordinator facilitates a transition conference with the child's parent(s), a provider from the IFSP team, and a PEA representative, when the child is between two years six months and two years nine months of age. The service coordinator is required to document the transition conference utilizing a Transition Conference Summary, which contains the date of the transition

meeting. AzEIP used monitoring data from program self-assessments and on-site monitoring visits for this sub-indicator, reviewing child files to determine whether the transition conference occurred within required timelines.

C. Throughout a child's continued eligibility with AzEIP, families are informed that those supports and services are provided until their child turns three years of age. AzEIP's current IFSP form contains the required steps for transitioning children and their families on the Transition Plan and Timeline pages. The service coordinator is charged with facilitating the transition and documenting the steps as they are completed. Ongoing technical assistance and training has been provided over the last year to inform service coordinators of the documentation requirement when assisting families through the transition process.

Baseline Data for FFY 2004 (2004-2005):

A. IFSPs with transition steps and services

File Reviews	# of Files Reviewed	# Compliant	% Compliant
Program Self-Assessments	130	46	35%
Site visits	67	36	54%

B. Notification

33 of 34 service coordination providing agencies/programs provided notification to the LEA of all children potentially eligible for Part B = 97% compliance.

C. Transition conference

File Reviews	# of Files Reviewed	# Compliant	% Compliant
Program Self-Assessments	60	40	67%
Site visits	51	24	47%

Discussion of Baseline Data:

Each child's IFSP includes a Transition Plan and Timelines section outlining the specific transition steps and services required. Programs were determined compliant when the IFSP included documentation of the assigned responsibilities for transition and the dates completed. While service coordinators reported that they facilitated the steps throughout the transition process, including the transition conference, there was inconsistent documentation on the IFSP itself. The lack of documentation appeared to be a primary contributing factor to the low compliance rating.

The revised Transition IGA went into effect in November 2004 and statewide training was provided to all service coordinators across the AzEIP service providing agencies in the following months. The Transition IGA requires the service coordinator to complete a "Transition Conference Planning" form at the time of the transition conference, identifying the steps, responsible person(s), and timelines to ensure the child transitions at age three. While the Program Self-Assessments and Cycle 1 monitoring visits occurred prior to the Transition IGA, Cycle 2 visits occurred afterwards. Those Cycle 2 programs monitored in early summer 2005, showed significantly higher compliance with documenting transition steps and services and the transition conference date. For example, of the 20 files reviewed, 14 (70%) included documentation of transition steps and services. Of 18 files

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reviewed, 14 (77%) included documentation that the transition conferences were held between 2.6 – 2.9. The improvement in the documentation may be directly related to the training on the Transition IGA and the subsequent implementation of the new forms and requirements.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100%
2006 (2006-2007)	100%
2007 (2007-2008)	100%
2008 (2008-2009)	100%
2009 (2009-2010)	100%
2010 (2010-2011)	100%

Improvement Activities/Timelines/Resources:

Improvement Activities	Timelines	Resources
Update IFSP form and related procedures, as needed, to align with SPP indicators		
Revise IFSP and IFSP Guidance document to delineate transition steps and services.	March - May 2006	CQI Coordinators, CSPD Coordinator, Technical Assistance & Monitoring Specialist
Disseminate revised IFSP form with guidance document	July 2006	CQI Coordinators, Technical Assistance & Monitoring Specialists, CSPD Coordinator
Provide technical assistance related to required documentation of transition information on the IFSP and related documents.	July - September 2006	CQI Coordinators, Technical Assistance & Monitoring Specialists
Revise data systems to capture required transition data elements and to identify areas of non-compliance.	July 2006	TA Specialists and Management Information Coordinator

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Revise, if needed, Transition IGA to align with IDEA 2004 when regulations are available	December 2007	CSPD Coordinator, CQI Coordinators
Continue annual cross-training on the Transition IGA in collaboration with ADE	November 2006 and annually through 2010	Local Program Coordinators, TA & Monitoring Specialists, CSPD Coordinator
Incorporated herein by reference are the applicable Improvement Activities from Indicator #9 related to revisions of monitoring tools and procedures.		

Overview of the State Performance Plan Development: Described in Indicator 1.

(The following items are to be completed for each monitoring priority/indicator.)

Monitoring Priority: Effective General Supervision / General Supervision

Indicator – 9. General supervision system (including monitoring, complaints, hearings, etc.) identifies and corrects noncompliance as soon as possible but in no case later than one year from identification

Measurement:

- A. Percent of noncompliance related to monitoring priority areas and indicators corrected within one year of identification:
 - a. # of findings of noncompliance made related to priority areas.
 - b. # of corrections completed as soon as possible but in no case later than one year from identification.

Percent = b divided by a times 100.

For any noncompliance not corrected within one year of identification, describe what actions, including technical assistance and/or enforcement that the State has taken.

- B. Percent of noncompliance related to areas not included in the above monitoring priority areas and indicators corrected within one year of identification:
 - a. # of findings of noncompliance made related to such areas.
 - b. # of corrections completed as soon as possible but in no case later than one year from identification.

Percent = b divided by a times 100.

For any noncompliance not corrected within one year of identification, describe what actions, including technical assistance and/or enforcement that the State has taken.

- C. Percent of noncompliance identified through other mechanisms (complaints, due process hearings, mediations, etc.) corrected within one year of identification:
 - a. # of EIS programs in which noncompliance was identified through other mechanisms.
 - b. # of findings of noncompliance made.
 - c. # of corrections completed as soon as possible but in no case later than one year from identification.

Percent = c divided by b times 100.

For any noncompliance not corrected within one year of identification, describe what actions, including technical assistance and/or enforcement that the State has taken.

Overview of Issue/Description of System or Process:

Arizona's Continuous Monitoring and Quality Improvement System (CMQIS)

Overview

DES/AzEIP administers a multi-faceted Continuous Monitoring and Quality Improvement System (CMQIS), which includes: (1) family surveys and interviews; (2) Program Self-Assessments (PSA); (3) periodic desk audits; (4) cyclical on-site monitoring reviews and/or focused monitoring reviews; and (5) agency level reviews. The system is on a five-year monitoring cycle. The following describes each facet of the system:

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1) Family Surveys

- Distributed to families at their initial and annual Individualized Family Service Plan meetings
- DES/AzEIP provides a summary of the family survey results to programs.
- The programs reflect the survey results in the annual Program Self-Assessment
- Areas of non-compliance are addressed in the corrective action plan and used to target areas for improvement and technical assistance

2) Program Self-Assessment

- Annually, each agency's service coordination unit(s) submit the AzEIP Program Self-Assessment to their contracting agency and/or to DES/AzEIP.
- The PSA spans the cluster areas of General Supervision, Child Find, Early Intervention in Natural Environments, and Transition.
- This self-assessment is based on data and documents program performance related to AzEIP policies and procedures and IDEA, Part C requirements, using tools including the Child File Audit, the Personnel File Audit, the Physical Setup Checklist, and the PSA itself.
- Based on data gathered through the PSA, agencies are required to develop a Corrective Action Plan (CAP) for any areas of non-compliance.

3) Desk Audits

- DES/AzEIP conducts a review of all existing data submitted to DES/AzEIP by the AzEIP participating agencies (including DES/AzEIP contractors) and analyzes the data to identify areas of strength and areas in need of correction/improvement planning.
- If areas of non-compliance are identified through the Desk Audit process, DES/AzEIP ensures the areas on non-compliance are addressed through the programs existing Corrective Action Plan, if the non-compliance is not already included. Focused on-site monitoring visits may also be conducted.

4) Site Reviews

- DES/AzEIP established a 5 year monitoring cycle for conducting site reviews based on population and risk factors. Maricopa County, which consists of 60% of the population in the State and had known system concerns and compliance issues, was chosen for Cycle 1. Cycle 2, 3, 4, and 5 were chosen by risk factors, and then grouped geographically. Although each cycle receives a site visit every five years, DES/AzEIP may conduct a site review outside of the cycle when serious issues of non-compliance are identified through complaints, desk audits, PSA and/or when issues of non-compliance are not corrected.
- Site visits are a synthesis and verification of Program Self-Assessment, desk audits, and child, personnel, and financial file reviews.
- Prior to a site visit, DES/AzEIP reviews:
 - Agency/program policies and procedures.
 - Financial information.
 - ACTS/MIS data.
 - Family Survey data.
 - Program Self-Assessment data, and
 - Dispute resolution information
- The site review results in a summary report, and if needed, a corrective action plan to ensure compliance with IDEA, Part C and AzEIP policies and procedures, as well as, improvement of program practice, within one year of the monitoring visit.

5) Agency level

The Intergovernmental Agreement involving AzEIP participating agencies required under A.R.S. § 8-652 provides corrective action according to its terms, relevant law, and policies and procedures. to address non-compliance. AzEIP participating agencies that provide early intervention services also report monthly data to DES/AzEIP on: timeline compliance, services identified on the IFSP and services provided, and fiscal resource information.

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Identification of Non-Compliance

When areas of non-compliance are identified, programs are required to complete and submit a Corrective Action Plan (CAP). Components of the CAP include:

- Analysis of the "root cause" of non-compliance
- Outline of targets (proposed evidence of change)
- · Activities to achieve results
- Projected timelines (one year or less)
- Persons responsible
- Available resources
- Technical assistance needs to correct non-compliance

Follow up to CAP includes:

- Submission to and approval by the state agency/program representative and DES/AzEIP
- Once approved, programs submit, as required, status updates at 45 days, 6 months, and annually to its contracted agency and/or DES/AzEIP.
- If 6 month progress report does not show a program progressing towards compliance, the
 regional Technical Assistance and Monitoring Specialist (TAMS) assigned to the program will
 meet with the program to further investigate root causes of the non-compliance. The TAMS
 will provide identified technical assistance directly or access it through other available
 resources.
- Programs are required to verify compliance in their annual PSA in all areas, including areas
 of non-compliance identified in previous years PSA.

Technical Assistance System

Arizona's CMQIS is directly linked to its Technical Assistance (T/A) System, which responds to system needs identified through the CMQIS, the Comprehensive System of Personnel Development, and identified State initiatives. Technical assistance is provided through a variety of ways to ensure that the assimilation and application of information is available to the early intervention community, including dissemination through list-servs and posting T/A bulletins on the AzEIP website. The overall goal of the T/A system is to provide programs the opportunity to enhance their confidence and competence in providing early intervention supports and services in accordance with IDEA, Part C and AzEIP policies and procedures. TAMS have been designated to support and provide technical assistance to early intervention programs in their region throughout the monitoring process. The TAMS will aid in the program's development of their PSAs, preparation for on-site monitoring visits, development and implementation of corrective action plan, and the provision of identified technical assistance and training. The regional TAMS have access to a breadth of expertise through the DES/AzEIP staff and other TAMS to effectively support programs to improve their performance and compliance. The TAMS also have access to the T/A Cadre for T/A and training in identified priority areas and facilitating the integration of that T/A information into practice.

Sanctions

Early intervention programs holding contracts with DES/AzEIP are subject to the following sanctions for failure to comply with the CMQIS, including continued non-compliance:

- (a) focused monitoring visit to review files, meet with staff, and identify strategies for improvement;
- (b) submittal of documentation on a regular basis (e.g., monthly) concerning area(s) of non-compliance;
- (c) adjustment to the amount of payment or withholding of payment until satisfactory resolution of default/non-compliance; and
- (d) termination of the contract in whole or in part.

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Baseline Data for FFY 2004 (2004-2005):

- A. # of programs monitored = 31
 - a. # of findings = 58
 - **b. Not available yet** As described in "Discussion of Baseline Data" below, data will be available and reported in the March 2006 Compliance Agreement progress report and in subsequent APRs and progress reports, as required.
- B. # of programs monitored = 31
 - a. # of findings = 406
 - **b. Not available yet** As described in "Discussion of Baseline Data" below, data will be available and reported in the March 2006 Compliance Agreement progress report and in subsequent APRs and progress reports, as required.
- C. a. 0
 - b. 0
 - c. NA

Discussion of Baseline Data:

A. Of the 31 programs monitored, data from Cycles 1 and 2 (15 programs) was collected through onsite reviews. Data from Cycles 3, 4, and 5 (16 programs) was collected through program self-assessments.

2004-2005 was the first year the Arizona CMQIS was implemented. Every agency or contracted program providing service coordination participated in the monitoring process through submission of program self-assessments, and for Cycles 1 and 2, on-site reviews. Programs will be submitting their close-out CAP data and annual PSAs November 2005 through January 2006. The data will be reviewed and analyzed, the number of corrections compiled, and the data reported in the March 2006 Compliance Agreement Quarterly Report and in subsequent APRs, as required.

Participating agencies and programs reported that the PSA brought greater awareness and understanding to the requirements under IDEA, Part C and AzEIP policies and procedures. Many reported that they better understood the requirements and were able to utilize the monitoring tools, such as the child file audit, for staff training, supervision, and on-going monitoring of child files.

Specific discussion of the baseline data for the priority monitoring indicators is included in the individual priority indicator sections throughout the State Performance Plan.

B. Compilation table:

Compliance Indicators	Monitoring	# of	# of	# Corrected	%
	Method	programs	findings	w/in 1 year	Corrected
			across		w/in 1 year
			programs		
General Supervision	Self-	16	84	NA	NA
* 11 items	Assessment				
	Site Reviews	15	52	NA	NA
Child Find	Self-	16	26	NA	NA
* 3 items	Assessment				
	On site	10	16	NA	NA
	reviews				

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Compliance Indicators	Monitoring Method	# of programs	# of findings across programs	# Corrected w/in 1 year	% Corrected w/in 1 year
IFSP Required Components * 8 items	Self- Assessment	16	75	NA	NA
	On site reviews	15	84	NA	NA
Service Coordination Functions * 3 items	Self- Assessment	16	13	NA	NA
	On-site reviews	15	18	NA	NA
Transition * 2 items	Self- Assessment	16	20	NA	NA
	On site reviews	15	18	NA	NA
Sub Totals	Self- Assessment	16	218	NA	NA
	On-site Reviews	15	188	NA	NA
Totals			406	NA	NA

The data reflected in the non-priority indicators included a total of 24 items rolled up into five cluster areas. Each of the 24 items is a federal requirement under IDEA, Part C. General Supervision includes procedural safeguards such as prior written notice, consent, and confidentiality. The Child Find section includes the requirements for a multidisciplinary evaluation in the eligibility determination process, the assessment of all areas of developments, and documentation that the evaluation was conducted in the family's primarily language. IFSP Required Components includes the eight required components for the IFSP, and Service Coordination reflects designation of a single service coordinator to serve a single point of contact, coordination with community resources, and on-going reviews of the IFSP. The Transition section includes the documentation of transition discussions of all available options throughout a child's enrollment in AzEIP and documentation that appropriate records were provided to the school district, with parent permission, at the transition conference.

DES/AzEIP implemented its CMQIS in 2004. As one year reports on CAPs developed for this period are due November 2005 through January 2006, DES/AzEIP will submit the one-year data for areas of non-compliance in the March 2006 Compliance Agreement quarterly report and subsequent reports as required.

C. Non-Compliance Identified Through other Mechanisms

While areas of non-compliance were identified through investigations of informal and formal complaints, the areas of non-compliance were addressed within the program's Corrective Action Plans. The areas of non-compliance identified were primarily concentrated in one County within the State and related to the 45-day timeline, timely provision of services, and service coordination functions not being fulfilled. All of the programs within this specific County had findings in all three of these areas. Corrective Action Plans were developed and related technical assistance was provided. Data related to correction will be reflected in the data reported in 9A.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	25%
2006 (2006-2007)	50%
2007 (2007-2008)	100%
2008 (2008-2009)	100%
2009 (2009-2010)	100%
2010 (2010-2011)	100%

Improvement Activities/Timelines/Resources:

Improvement Activities	Timelines	Resources
Revise, disseminate, and implement the Interagency Agreements with the AzEIP participating Agencies to address general supervision requirements.	April 30, 2006	DES/AzEIP, the State Interagency Team, and the Attorney General's Office.
Implement the monitoring system in accordance with the cycles.		
Implement the Program Self- Assessment with Service Coordination providers statewide.	In accordance with established monitoring cycles	CQI Coordinators, TA and Monitoring Specialists, LPCs and agency partners
Implement the "desk audit" process: analyze available data from all sources, including comparisons over time, and utilize analysis to identify issues of compliance and non compliance.	In accordance with established monitoring cycles	CQI Coordinators, TA and Monitoring Specialists, TA Specialist
Implement the site review process with Service Coordination providers statewide.	In accordance with established monitoring cycles	CQI Coordinators, TA and Monitoring Specialists, and agency partners
Review and approve corrective action plans.	In accordance with established monitoring cycles	CQI Coordinators, TA and Monitoring Specialists, and agency partners

Monitor progress on corrective action plans.	In accordance with established monitoring cycles	CQI Coordinators, TA and Monitoring Specialists, and agency partners
Review and approve "completion and close-out" of corrective action plans.	February 2006 and on-going	CQI Coordinators, TA and Monitoring Specialists,
Implement intensified corrective action plan with specific technical assistance for non-compliance items not resolved with one year.	February 2006 and ongoing, as needed	CQI Coordinators, TA monitoring specialists
Implement appropriate sanctions or enforcement activities for failure to complete corrective action items.	February 2007 and on-going	DES/AzEIP staff and agency partners
Explore incentives for programs with close-outs in 9 months or less.	February 2007	CQI Coordinators and agency partners
Review and revise polices, procedures, and/or tools of the CMQIS to ensure alignment with new Federal and/or State policies and procedures and SPP requirements.	March 2006 & ongoing annually 9/30/06 and 9/30/07	CQI Coordinators, TA Specialist
Realign monitoring cycle with regions established under the AzEIP system redesign.	January 2007	DES/AzEIP staff
Implement the NCSEAM family survey and incorporate into the CMQIS		
Analyze family survey results, compare to baseline data, and review trends. Utilize results to inform monitoring and corrective action	December 2006 & annually through 2010	CQI Coordinators, and agency partners
Provide findings from family surveys to AzEIP service providing agencies that are responsible for sharing with appropriate providers/contractors.	December 2006 & annually through 2010	CQI Coordinators and agency partners
Update IFSP form to document dissemination of family survey annually.	January 2006 – March 2006	CQI Coordinators, CSPD Coordinator, Technical Assistance & Monitoring Specialist
Incorporated herein are the improvement activities from Indicator 14 regarding management information systems.		
Incorporated herein are the improvement activities from Indicator 1 regarding implementation of the team-based service delivery model.		
Incorporated herein are the improvement activities from Indicator 7 regarding revision to the IFSP form and policies.		
Incorporated herein are the improvement activities from Indicator 1, 7, and 8 regarding the establishment or revision of policies and procedures.		

Overview of the State Performance Plan Development: Described in Indicator 1.

(The following items are to be completed for each monitoring priority/indicator.)

Monitoring Priority: Effective General Supervision / General Supervision

Indicator – 10. Percent of signed written complaints with reports issued that were resolved within 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint.

Measurement: Percent = (1.1(b) + 1.1(c)) divided by (1.1) times 100.

Overview of Issue/Description of System or Process:

DES/AzEIP ensures that any individual or organization may file a written, signed complaint with DES/AzEIP alleging any violation of the requirements of IDEA, Part C. The information describing the procedures to resolve disputes, including filing a complaint and requesting mediation and a due process hearing, are contained in the Procedural Safeguards for Families handbook (the "Handbook"). DES/AzEIP disseminates Handbooks to all agencies and programs that provide service coordination from its office and through the AzEIP Local Program Coordinators. The Handbook is also available at the parent training centers and the information is available on the DES/AzEIP website.

Families are provided the Handbook upon request and in conjunction with the following events: initial evaluation and assessment; eligibility determination; prior written notice; and six month, annual or other IFSP reviews. The Handbook is printed in English and Spanish. Service Coordinators are responsible for providing families with these booklets and explaining the information in the booklet to families. Families are informed that they may file a formal complaint and use the informal complaint resolution process at the same time. If appropriate, Service Coordinators may help families file a formal complaint. Service Coordinators, as well as, all providers of early intervention services, are required to attend AzEIP's Standards of Practice training entitled Policies and Professionalism, wherein information concerning families' procedural safeguards is discussed.

To file a system complaint, an individual or organization must send a written, signed complaint to the Executive Director of DES/AzEIP, include a statement that the State has violated a requirement or regulation of IDEA, Part C, and provide the facts of the situation. The Executive Director or designee reviews the complaint to determine its validity for follow-up. A complaint is judged valid if the alleged violation occurred not more than 1 year before the date the complaint was received, unless (a) the alleged violation continues for the child or other children, or (b) the complainant is requesting reimbursement or corrective action for a violation that occurred not more than 3 years before the complaint was received. The Executive Director or designee reviews all relevant information and conducts an independent on-site investigation, if necessary, and gives the complainant the opportunity to submit additional information, either orally or in writing, about the allegations in the complaint.

The Executive Director or designee makes an independent determination as to whether the agency is violating a requirement or regulation of IDEA, Part C. The Executive Director of DES/AzEIP sends a written decision to all parties within 60 days from the date of receipt of the complaint. The decision addresses each allegation in the complaint and includes the findings of fact and conclusions and the reasons for the final decision. When appropriate, DES/AzEIP's decision also includes procedures for technical assistance, negotiation, and corrective action plans for bringing an agency into compliance. In resolving a complaint in which it finds a failure to provide appropriate services, DES/AzEIP, pursuant to its general supervisory authority under IDEA, Part C addresses:

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- (1) how it will remediate the denial of those services, including, as appropriate, the awarding of monetary reimbursement or other corrective action appropriate to the needs of the child and the child's family; and
- (2) appropriate future provision of services for all infant and toddlers with disabilities and their families.

All investigations and resolutions are completed within 60 days of original receipt of the complaint. An extension may be granted in extraordinary cases only where the nature or severity of allegations warrants further investigation. If a written complaint is received that is also the subject of a due process hearing, or contains multiple issues, of which one or more are part of that hearing, DES/AzEIP sets aside any part of the complaint that is being addressed in the due process hearing until the conclusion of the hearing. However, any issue in the complaint that is not a part of the due process action is resolved within the 60-calendar day timeline using the procedure described above. If an issue is raised in a complaint that has previously been decided in a due process hearing involving the same parties, the hearing decision is binding, and DES/AzEIP informs the complainant to that effect.

If an AzEIP participating agency utilizes its own process for dispute resolution, it ensures through written agreement that its policies and procedures are consistent with the rules and regulations of 34 CFR 303.419-425 and DES/AzEIP policies. If the child who is the subject of the dispute is also eligible for another Federal or State program, which has its own dispute resolution process, DES/AzEIP and the other administrative entity will collaborate to determine jurisdiction based on the nature of the complaint. For all complaints alleging failure to implement AzEIP according to IDEA, Part C, DES/AzEIP will facilitate or designate an AzEIP participating agency to facilitate the dispute resolution process according to IDEA, Part C. If the complaint involves an application for initial services, the child must receive those services that are not in dispute. Complaints alleging a failure by an AzEIP participating agency or contractor to implement a due process hearing decision must be resolved by DES/AzEIP.

DES/AzEIP monitors the provision of procedural safeguards to families through its Continuous Monitoring and Quality Improvement System, through agencies' and programs' self-assessment, onsite monitoring visits, and response to family complaints. Family interview questions also gather information telephonically during the on-site visits about whether families understand their rights in the early intervention program. The NCSEAMS family survey additionally asks parents about whether they know their rights in the early intervention system.

DES/AzEIP logs formal and informal complaints to ensure the information is captured accurately and that all complaints are resolved in a timely manner. DES/AzEIP monitors the trends and themes from both its formal and informal complaint log and compares with its monitoring data. Technical assistance and/or focused monitoring are undertaken as appropriate and corrective action plans prepared.

Baseline Data for FFY 2004 (2004-2005):

100%

Discussion of Baseline Data:

DES/AzEIP received four formal complaints, one in which a report with no findings was issued within the 60 day time frame. The three remaining complaints were resolved informally and subsequently withdrawn within the 60 day timeframe.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100%
2006 (2006-2007)	100%
2007 (2007-2008)	100%
200 8 (2008-2009)	100%
2009 (2009-2010)	100%
2010 (2010-2011)	100%

Improvement Activities/Timelines/Resources:

Improvement Activities	Timelines	Resources
Continued implementation of the AzEIP Standards of Practice to support understanding of how and when to provide families with their procedural safeguards.	December 2005 with ongoing trainings and/or test options	CSPD Coordinator, ASDTP Staff
Conduct semi-annual reviews of the complaint logs to assist in identifying and resolving systemic issues.	December 2005 and every six months through 2010	CQI Coordinators, Technical Assistance & Monitoring Specialists
Implement a reminder system to alert the complaint investigator a week prior to a complaint due date that the 60- day timeline is about to expire.	January 2006	CQI Coordinators
Incorporated herein are the improvement activities from Indicator #9 regarding (i) implementation of the NCSEAM family survey to collect data about family rights; (ii) establishment or revision of policies and procedures; (iii) implementation of the monitoring system; and (iv) reviewing and, if needed, revising the polices, procedures, and/or tools of the CMQIS to ensure alignment with new Federal and/or State policies and procedures		

Overview of the State Performance Plan Development: Described in Indicator 1.

(The following items are to be completed for each monitoring priority/indicator.)

Monitoring Priority: Effective General Supervision / General Supervision

Indicator – 11. Percent of fully adjudicated due process hearing requests that were fully adjudicated within the applicable timeline.

Measurement: Percent = (3.2(a) + 3.2(b)) divided by (3.2) times 100.

Overview of Issue/Description of System or Process:

The overview of how and when families receive information about their procedural safeguards concerning due process hearings is found in the Overview for Indicator GS 10, along with the mechanisms DES/AzEIP has in place to monitor and correct non-compliance areas. All due process hearings are carried out at a time and place that is reasonably convenient to the family. A hearing may be initiated on any matters related to AzEIP's proposal or refusal to initiate or change the: (a) identification of the child; (b) evaluation of the child; (c) placement of the child; or (d) provision of early intervention services to the child and family.

To initiate a due process hearing, the following steps must be taken:

- A. A written request must be filed with the appropriate participating agency representative or with the Executive Director of DES/AzEIP.
- B. The appropriate AzEIP participating agency representative, or the Executive Director of DES/AzEIP or a designee, appoints a trained, impartial hearing officer.
- C. The hearing officer:
 - (1) has knowledge about the provisions of IDEA, Part C and the needs of, and services available for, eligible children and their families;
 - (2) is not employed by the agency providing early intervention services to the child and family, except when a person who otherwise qualifies to conduct the hearing is paid by the agency solely to serve as a hearing officer; and
 - (3) does not have a personal or professional interest that would conflict with his or her objectivity in implementing the process.
- D. The hearing officer:
 - (1) listens to the presentation of relevant viewpoints about the dispute;
 - (2) examines all information relevant to the issues:
 - (3) seeks a timely resolution; and
 - (4) provides a record of the proceedings including a written decision.
- E. The due process hearing procedure is completed and a written decision mailed to each of the parties within 30 days after the appropriate AzEIP participating agency or DES/AzEIP has received the request.
- F. Unless agreed upon by the family and the agency, there is no change made in the services received by the child during the pendency of the due process hearing prior to a final order by a Hearing Officer.
- G. The decision made in a hearing is final.

An AzEIP participating agency may follow its own due process hearing procedures, as long as they are consistent with the rules and regulations of 34 CFR §§303.419-425 and DES/AzEIP policies. If the child who is the subject of the hearing is also eligible for another Federal or State program, which has its own due process hearing procedures, DES/AzEIP and the other administrative entity will

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collaborate to determine jurisdiction based on the nature of the complaint. For all complaints alleging failure to comply with IDEA, Part C, DES/AzEIP will facilitate or designate an AzEIP participating agency to arrange the due process hearing according to IDEA, Part C. When an AzEIP participating agency uses its own process for a due process hearing, that agency must inform the Executive Director of DES/AzEIP within two days of receiving the complaint. The agency must then keep DES/AzEIP apprised of the progress of the dispute. If the AzEIP participating agency does not have its own procedures for due process hearings, or requires DES/AzEIP to facilitate the due process hearing for any reason, then the participating agency must inform DES/AzEIP within 24 hours of receiving the request.

Baseline Data for FFY 2004 (2004-2005):

Full compliance.

Discussion of Baseline Data:

One due process hearing request was filed and withdrawn within the 30 day timeframe as an informal resolution was reached between the parties involved.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100%
2006 (2006-2007)	100%
2007 (2007-2008)	100%
2008 (2008-2009)	100%
2009 (2009-2010)	100%
2010 (2010-2011)	100%

Improvement Activities/Timelines/Resources:

Improvement Activities	Timelines	Resources
Continued implementation of the AzEIP Standards of Practice to support understanding of how and when to provide families with their procedural safeguards.	December 2005 with ongoing trainings and/or test options	CSPD Coordinator, ASDTP Staff

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Incorporated herein are the improvement activities	
from Indicator #9 regarding (i) implementation of	
the NCSEAM family survey to collect data about	
family rights; (ii) establishment or revision of	
policies and procedures; (iii) implementation of the	
monitoring system; and (iv) reviewing and, if	
needed, revising the polices, procedures, and/or	
tools of the CMQIS to ensure alignment with new	
Federal and/or State policies and procedures	

Indicator 12 - Not Applicable

Overview of the State Performance Plan Development: Described in Indicator 1.

(The following items are to be completed for each monitoring priority/indicator.)

Monitoring Priority:

Indicator – 13. Percent of mediations held that resulted in mediation agreements.

Measurement: Percent = (2.1(a)(i) + 2.1(b)(i)) divided by (2.1) times 100.

Overview of Issue/Description of System or Process:

DES/AzEIP ensures that families receive information concerning their right to request mediation through the Families Rights Booklet. The overview of how and when families receive this information is found in the Overview for Indicator GS 10, along with the mechanisms DES/AzEIP has in place to monitor and correct non-compliance areas. Service Coordinators are trained through the AzEIP Standards of Practice, Policies and Professionalism training about a family's right to mediation under IDEA, Part C.

To initiate the mediation process, the following steps are taken:

- A. A family member or agency requests mediation, in writing, to the appropriate participating agency representative or to the Executive Director of DES/AzEIP.
- B. The appropriate AzEIP participating agency representative, or the Executive Director of DES/AzEIP or a designee, obtains written agreement to the mediation process by all other parties to the dispute.
- C. Once agreement is obtained, the appropriate AzEIP participating agency representative or the Executive Director of DES/AzEIP or designee, appoints a qualified, impartial mediator who is trained in effective mediation techniques and knowledgeable in laws and regulations related to all aspects of early intervention services. The appropriate AzEIP participating agency representative or the Executive Director of DES/AzEIP or a designee, ensures that each session of the mediation is scheduled in a timely manner and in a location convenient to all parties involved in the dispute.
- E. The appropriate AzEIP participating agency representative or the Executive Director of DES/AzEIP or a designee, ensures that agreements reached by all parties through mediation will be recorded in a written mediation agreement.

When a participating agency uses its own process for mediation, that agency must inform the Executive Director of DES/AzEIP within two days of receiving the request for mediation. The agency must then keep DES/AzEIP apprised of the progress of the request. If the AzEIP participating agency does not have its own procedures for mediation, or requires DES/AzEIP to facilitate the mediation process for any reason, then the participating agency must inform DES/AzEIP within 24 hours of receiving the request. The AzEIP participating agency or DES/AzEIP bears the cost of the mediation process. While mediation is pending, unless DES/AzEIP or the AzEIP participating agency and the family of a child otherwise agree, the child must continue to receive the appropriate early intervention services currently being provided.

Baseline Data for FFY 2004 (2004-2005):

Full compliance.

Discussion of Baseline Data:

One mediation request was received and withdrawn as an informal resolution was agreed upon by all parties.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100%
2006 (2006-2007)	100%
2007 (2007-2008)	100%
2008 (2008-2009)	100%
2009 (2009-2010)	100%
2010 (2010-2011)	100%

Improvement Activities/Timelines/Resources:

Improvement Activities	Timelines	Resources
Continued implementation of the AzEIP Standards of Practice to support understanding of how and when to provide families with their procedural safeguards. Incorporated herein are the improvement activities from Indicator #9 regarding (i) implementation of the NCSEAM family survey to collect data about family rights; (ii) establishment or revision of policies and procedures; (iii) implementation of the monitoring system; and (iv) reviewing and, if	December 2005 with ongoing trainings and/or test options	CSPD Coordinator, ASDTP
needed, revising the polices, procedures, and/or tools of the CMQIS to ensure alignment with new Federal and/or State law.		

SPP/APR Attachment 1 (Form)

Report of Dispute Resolution Under Part C of the Individuals with Disabilities Education Act Complaints, Mediations, Resolution Sessions, and Due Process Hearings

SECTION A: Signed, written complaints		
(1) Signed, written complaints total	4	
(1.1) Complaints with reports issued	1	
(a) Reports with findings	0	
(b) Reports within timeline	1	
(c) Reports within extended timelines		
(1.2) Complaints withdrawn or dismissed	3	
(1.3) Complaints pending		
(a) Complaints pending a due process hearing		

SECTION B: Mediation requests		
(2) Mediation requests total	1	
(2.1) Mediations		
(a) Mediations related to due process	1	
(i) Mediation agreements		
(b) Mediations not related to due process		
(i) Mediation agreements		
(2.2) Mediations not held (including pending)	1	

SECTION C: Hearing requests		
(3) Hearing requests total	1	
(3.1) Resolution sessions		
(a) Settlement agreements		
(3.2) Hearings (fully adjudicated)		
(a) Decisions within timeline SELECT timeline used {30 day/Part C 45 day/Part B 45 day}		
(b) Decisions within extended timeline		
(3.3) Resolved without a hearing	1	

Overview of the State Performance Plan Development: Described in Indicator 1.

(The following items are to be completed for each monitoring priority/indicator.)

Monitoring Priority: Effective General Supervision / General Supervision

Indicator – 14. State reported data (618 and State Performance Plan and Annual Performance Report) are timely and accurate.

Measurement: State reported data, including 618 data, State performance plan, and annual performance reports, are:

- a. Submitted on or before due dates (February 1 for child count, including race and ethnicity, settings and November 1 for exiting, personnel, dispute resolution); and
- b. Accurate (describe mechanisms for ensuring accuracy).

Overview of Issue/Description of System or Process:

Required data is collected through a variety of data systems utilized by participating State agencies and contracted programs. DES/AzEIP defines the data requirements, definitions, and values. All AzEIP State participating agencies and contractors are required to submit data to DES/AzEIP on a monthly basis.

After receipt of data by DES/AzEIP, records are combined, unduplicated, and run through a variety of programs to clean data, and perform edit checks and validations.

Baseline Data for FFY 2004 (2004-2005):

A. Timely submission of data to OSEP:

All 618 reports and annual performance reports for 2004-2005 were submitted in a timely manner.

B. Accuracy of data:

DES/AzEIP utilizes collected data to produce a variety of management reports. These reports are reviewed and analyzed to assess data collection procedures and practices and to determine whether data was accurate and timely. Technical assistance, including provision of error reports, is provided to agencies and contractors as needed.

Site monitoring of early intervention programs includes comparing data recorded in a child's paper file with data recorded in the electronic record.

Discussion of Baseline Data:

A. AzEIP service providing agencies (DDD, ADHS, and ASDB) and contractors submit child data to DES/AzEIP utilizing AzEIP's file layout in order to prepare the 618 data reports. All agencies are currently complying with the request in a timely manner.

Throughout the reporting period, the DES/AzEIP data manager held meetings with the data managers from the AzEIP service providing agencies to discuss the data requirements. These discussions included review and definition of data elements required, and procedures for transmitting the data on a monthly basis. The State agencies are cooperative in the process, but the timeframe for making changes to large, agency-wide data systems is often unpredictable.

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B. Crosswalks are utilized where needed between agency data systems and DES/AzEIP data requirements. These crosswalks are developed by the DES/AzEIP data manager and the agency data managers. Crosswalks are currently required between DES/AzEIP and the DDD for exit and IFSP data. A revision of the DDD data system is in process; DES/AzEIP is working with DDD to include all AzEIP data elements and eliminate the need for crosswalks.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100%
2006 (2006-2007)	100%
2007 (2007-2008)	100%
2008 (2008-2009)	100%
2009 (2009-2010)	100%
2010 (2010-2011)	100%

Improvement Activities/Timelines/Resources:

Improvement Activities	Timelines	Resources
Provide technical assistance, as needed, to resolve production problems, re-test and retrain.	December 2005 and Ongoing	TA Specialist, Management Information Coordinator
Evaluate Results of ACTS system revision. Check reports for accuracy Check if data is properly entered and validated Develop plan to correct, if needed Technical Assistance, if needed Fix production problems and retest and retain, if needed	January 2006	TA Specialist, Management Information Coordinator
Work with DES Division of Developmental Disabilities to revise the DDD data system to ensure inclusion of required data elements, reports and transfer of data to and from AzEIP.	July 2005- June 2006	TA Specialist, Management Information Coordinator, DDD
Implement and monitor the revised DDD system. Provide technical assistance, as needed, to resolve	June 2006 and ongoing	TA Specialist, Management Information Coordinator,

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production problems, re-test and retrain		DDD
production problems, re-test and retrain.		טטט
Monitoring protocol for Site Visits includes verification of individual child electronic records. Incorporated herein are the improvement activities from Indicator # 9 regarding continuing implementation of the monitoring system.	Ongoing	CQI Coordinators, TA and Monitoring Specialists, TA Specialists
Revise and expand policies and procedures related to data collection		
Revise data collection policies and procedures, as needed, and incorporate into policy and procedure manual.	February 2006	CQI Coordinators, TA and Monitoring Specialist, CSPD Coordinator
Align policies and procedures across all agencies and providers regarding data collection.	February 2006	CQI Coordinators, CSPD Coordinator, Executive Director, State Interagency Team, and TA and Monitoring Specialist
Disseminate and implement revised policies and procedures related to data collection across the service providing agencies	February and ongoing	CQI Coordinators, CSPD Coordinator, Executive Director, State Interagency Team, and
Monitor through CMQIS (see Indicator #9) to ensure implementation of policies and procedures	In accordance with monitoring cycles	CQI Coordinators, TA and Monitoring Specialist, CSPD Coordinator